

CVM Postdoctoral Trainee Research Grant Proposal Cover Sheet

Name:

Highest Degree Received:

Current Position Title:

Current PI (if you have one):

Department:

Mail Stop:

Phone number:

Email address:

- Are you a member of the CVM Postdoc Association? yes no
- Have you attended any CVM Postdoc Association meetings? yes no
- Are you Post-DVM or Post-PhD? yes no
- Have you submitted a grant proposal before? yes no
- If so, what funding agency was it submitted to and what type of award was it:
Have you received a grant? yes no
- If so please list the funding agency and the type of grant awarded:
Have you received a CVM Postdoctoral Trainee Research grant before? yes no
- If yes, have you obtained pre-approval to re-submit from Dr. Seabury? yes no

Proposal Details:

Title:

Mentor:

Mentor's Department:

Questions:

1. Will you be using human subjects? yes no
2. Will you be using lab animals? yes no
 - a. What species?
 - b. Will you/mentor need an AUP for this work? yes no
3. Will you be using recombinant DNA? yes no
4. Will you be using radioactive material? yes no
 - a. Do you/mentor have a permit? yes no
 - b. Are you a licensed user on a TAMU radiation permit? yes no
5. Will you be using infectious biohazards? yes no
 - a. What Biosafety Level? 1 2 3
 - b. Do you/mentor have an IBC permit for the proposed work? yes no
 - c. Are you a user on an IBC permit? yes no

Goals:

Where do you intend to submit a proposal with the preliminary data obtained from this award?

Agency(s):

Program (s):

Priority area(s):

Type of award(s):

Applicant Signature: _____

Date:

Mentor Signature: _____

Date:

Department Head Signature*: _____

Date:

**Please note that by signing this form you are agreeing to provide matching funds of \$5,000 if the student is selected for funding. No more than 2 postdocs will be funded from a single department without prior approval of the department head.*